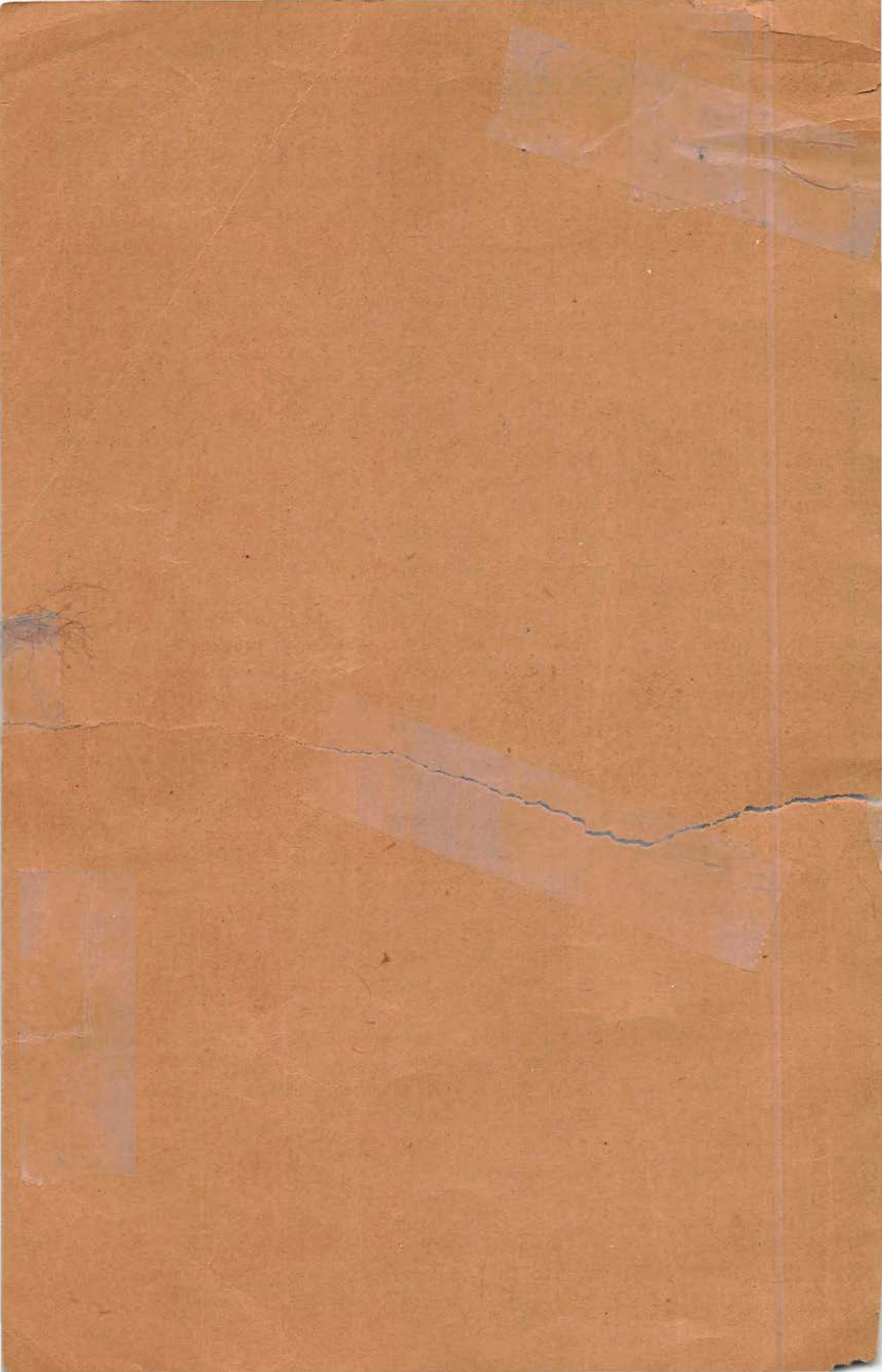


MASTERS OF THE MYSTIC SPELL

A Series of
Flash Lights
On the Use of
the
**HYPNOTIC
SPELL**
with All its
MYSTERIES
and POWERS
and TRIUMPHS

What is
Done, Thought
And Advised
BY THE WORLD'S
EXPERTS
IN
HYPNOTISM
AND
MAGNETIC
HEALING

By Prof. L. A. Harraden, Jackson, Mich.



MASTERS OF THE MYSTIC SPELL.

The extracts in this little volume have been culled from the writings of the world's chief adepts in hypnotism and healing. They were not meant to form a complete or connected treatise, and therefore I have not given them any precise classification. They may rather be taken as casual notes for the student—odd bits of opinion, counsel or experience—and mostly deal with topics that are apt to cause either doubt or difficulty. The index will show plainly their scope and variety, as well as make reference to them prompt and easy. To me it has been a labor of love to garner and prepare them for use; to my students they should prove both helpful and inspiring, just as if the Masters gave them vocal utterance.

PROF. L. A. HARRADEN.

Brief History of Hypnotism.—

MESMERIC SCHOOL BEGAN, 1778. Mesmer: founder. Mesmerism: after the founder. Animal Magnetism: Fluidic emanation from operator, directed by his will to impinge upon and transform, cure, etc., subject or patient. NANCY SCHOOL BEGAN, 1866. Liébault: founder. Bernheim: contemporary and co-laborator with founder. Suggestion rules Hypnotism. PARIS SCHOOL BEGAN, 1878. Charcot: founder. Salpêtrière: Paris Hospital and School of Medicine. Neurosis: Name given the theory that hypnosis is a diseased condition of the nerves, into which only those who have the necessary predisposition are easily placed, by things which appeal strongly to their emotions.—*Dr. Robert Sheerin.*

Hypnotism Strictly Defined.—

To define Hypnotism as induced sleep is to give too narrow a meaning to the term; to overlook the many phenomena which suggestion can bring about without actual sleep. I define Hypnotism as the indication of a peculiar psychical

condition which increases the susceptibility to suggestions. It is true that sleep facilitates suggestion, but it is not of necessity preliminary. It is suggestion that rules hypnotism.—*Dr. H. Bernheim.*

Healing Forces Defined.—

Magnetism teaches that there resides in man a subtle fluid of healing nature which may be projected at the will of the operator upon another person with the effect of curing the functional and organic diseases of the body, and from the time of Mesmer until the present, marvelous cures have been made. Hypnotism furnishes a power by which persons may be placed in a condition of induced sleep or hypnosis. While in that state they are suggestible and may be given suggestions that will relieve them from pain and cure their diseases. Many owe their good health to this system of therapeutics.—*Dr. A. C. Halphide.*

Definition of Mesmerism.—

This includes all the systems of healing

founded on the supposition that there exists in man a fluid which can be projected upon another, at the will of the operator, with the effect of healing disease by the therapeutic action of the fluid upon the diseased organism.—*Dr. Thomson Jay Hudson.*

Is it a Gift? What is this power to hypnotize? It is simply and solely the power to tranquilize the nervous system of another by forcible statements confidently made. Is this a gift? It is so common an endowment that fifty persons out of a hundred have it, and know they have it; and the remaining fifty have it, but do not know they have it.—*Hypnotic Magazine.*

A Non-Exclusive Science.—The world at large will continue to believe that the laws of hypnotism are no exception to the rule that the forces of nature, when once understood, are designed for the highest good of mankind; and they will continue to demand that those forces shall not be monopolized by any man or set of men, body politic, or corporation.—*Dr. T. J. Hudson.*

Rights of the Laity.—It is the right of a mother to know how to benefit her child by suggestion. It is the right of a husband to know how to alleviate his wife's pain. It is the right of parents to know how to advance the physical as well as the moral health of their offspring. Suggestive therapeutics teaches this, and hence I maintain that the layman has as good a right to a knowledge of this work, and its practice, as any physician. A layman has not a right to give medicines. That is the province of the physician.

Nor has he the right to assume that by the power of the mind alone all conditions of disease are curable. Experience teaches otherwise. But he most certainly has the right to cultivate for his own benefit and for the benefit of his family or friends, the power inherent in him of resistance to, and prevention of, disease.—*Dr. Sydney Flower.*

Ordinary Business Influence.—Supposing two business men come together. One, without the other having the least idea of it, is studying the weak points of his associate. The stronger and more intelligent of the two will, after a while, bring the other to look upon a subject as he desires, and finally to submit to his wishes. This, then, is suggestion with hypnotic influence, though the person is perfectly awake. The person upon whom the influence is brought to bear imagines himself to be possessing all his senses, while at the same time he is bound to submit to the influence of the other. As a result of this kind of suggestion many otherwise shrewd business men are frequently led to enter upon business enterprises which they, under other conditions, when exactly the same offers were made by the same people, refused to accept or consider, because they then followed their own particular interest; and hence they did not commit any folly to regret later on. As soon as the weaker party is out of the sight of the stronger, the former perceives his blunder, but alas! too late.—*Carl Sextus.*

Mission of Hypnotism.—There is a higher side to hypnotism. It is an agent for good; it is never, in skillful hands, an agency for evil. Its value

to the physician and to the psychologist cannot be estimated. It affords a means by which the power of the mind to heal the body may be manifested. The power itself is the power in the person cured to heal himself. Who shall name this power? Let it be the divine spirit, the soul, the subjective mind, anything you will—it is there. I believe that hypnotism, rightly applied, is the most successful, because it can be the most universal, method of calling this power into action.—*Dr. Sydney Flower.*

Stimulus in Education.—To correct and eventually eliminate bad habits in the child; or to remove from his mind the dangerous suggestions planted by others; to strengthen his instinctive goodness, and to develop noble qualities in him, it is only necessary to make a daily practice of giving him forcible suggestions while he sleeps. It does not matter whether the sleep occurs at night or is induced in the day-time. The value of the suggestion given is in proportion to its force and directness. It is not enough to suggest to a lazy boy that in course of time he will begin to pay more attention to his studies and will cease to be a reproach and a by-word. It is necessary immediately to forcibly counteract the thoughts which have found a lodgement in his mind. Work upon his self-respect by insisting forcibly that he is not a dunce; that he is as bright as any one of his school-mates; and that he has as much power of steady application in him as they. Remove from his mind the idea of intellectual inferiority. It will be found that the removal of this belief makes room for the young bud of ambition, and fosters the spirit of emulation.—*Dr. Sydney Flower.*

Obedience in Hypnosis.—The power that we acquire over those individuals who are brought into the hypnotic condition (somnambulism) is only unlimited when it concerns their health and welfare. Outside of that they can only be brought to do harmless acts, such as going to and from places, dance, sing, carry articles to different places, etc., in short, what anybody would do in a normal condition. But there are limits beyond which this power is without effect; and I can say almost positively that every hypnotist invariably feels and knows that his subject will obey him to a certain extent, and where the suggestions are disagreeable to the subject's own morals and character, they positively fail.—*M. de Puységur.*

Hypnotism and Crime.—Although any somnambulist of intelligence will not hesitate to carry through a "laboratory crime" with every detail vividly presented, and rendered charmingly thrilling in its stage effect by the accompanying homily of the professor regarding the evil power of suggestion upon "these irresponsible beings," yet in no instance has an operator been able to influence a subject to commit a crime for which the latter could be held accountable. The reason for this is not far to seek. The instinct of self-preservation is entirely subjective and is, therefore, most in evidence when the person is in the somnambulist or subjective condition. He will, therefore, refuse to accept a suggestion which may bring disagreeable consequences upon himself.—*Hypnotic Magazine.*

Influence on Minds.—The successful salesman is the man who can so forcibly suggest to his customer that

he moulds the opinion of the latter and influences his will. Do not confuse this natural and inevitable influence of mind upon mind, which is suggestion, with the popular idea of "hypnotic influence." Compelling force never enters into suggestion or into hypnotism. It is never a question of projected will-power, odic force, and so forth; it is always a question of manner, tact, dress, appearance, practice, and knowledge of human nature. Whether it is a question of magnetic, suggestive or divine healing, or whether it is a question of selling a piece of cloth, the principle of success is always the same. The customer or patient takes heed; the operator or salesman rouses the patient or customer to a condition of receptivity; to a point where the idea suggested is favorably regarded, accepted, becomes fact, in his mind. Without his co-operating imagination you can do nothing; you do not impress him; with it you can work marvels.—*Dr. Sydney Flower.*

Is Hypnotism Harmful?—This subject seems an unsettled question in the minds of many. A little thought should remove every doubt. Where does the use of hypnotism begin, and by whom is it first and most used? It begins with the mother with the babe in her arms, and if it were harmful (by frequent and continued practice) we would be a race of imbeciles, as every mother, as she rocks her babe to sleep day after day, produces hypnosis as truly and effectually as the most accomplished "Professor" possibly could. Yet the child thrives and grows strong, mentally and physically, from day to day. The devoted mother runs the whole gamut of "methods" mapped

out by the expert hypnotist, and produces the same results; yet no one has ever thought to chide her for thus "injuring the subject"—the child. In this very process, mother and child become *en rapport* in which there is much tending to account for their abiding love for each other.—*Dr. P. S. Dody.*

Perseverance Advised.—I may assert that most people can be hypnotically influenced by a rightly adapted method. Nevertheless, both patience and perseverance are sometimes required. For instance, I finally succeeded in hypnotizing a lady of about forty, after having endeavored in vain seventy times to do so, and thus alleviated her severe sufferings of more than twenty years' standing. Often patients believe they are going to fall asleep at once, but that is exceptional, and an effect is generally obtained only after three or four attempts, and frequently more become necessary. On the other hand, some people are so susceptible that they are put to sleep almost instantaneously.—*Dr. O. G. Wetterstrand.*

Quality of Faith Desired.—The faith required for therapeutic purposes is a purely subjective faith, and is attainable upon the cessation of active opposition on the part of the objective mind. And this is why it is, under all systems of mental therapeutics, that perfect passivity of the patient is insisted upon as the first essential condition. Of course, it is desirable to secure the concurrent faith both of the objective and subjective minds; but it is not essential, if the patient will in good faith make the necessary auto-suggestion, as above mentioned, either

in words, or by submitting passively to the suggestions of the healer. — *Dr. T. J. Hudson.*

Good and Bad Subjects.—The character of the subject is of greater importance than the temperament. If noble motives predominate over lower and merely selfish ones, if the person is earnest, and, above all, confiding and believing; then such qualities will be found particularly favorable for hypnosis. Those people, on the contrary, who possess too great a tendency to skepticism and criticism are less impressionable. Again, those who have an almost morbid imagination or remarkable reflective power cannot fix their thoughts for a certain length of time upon one object, and are, therefore, equally unable to concentrate them within the space of simple and limited ideas. It is difficult, if not absolutely impossible, to make any impression upon nervous, restless and egotistical people and those who are not accustomed to control themselves, or upon spoiled and capricious natures, who at the same time enjoy in a certain sense their invalidism. The intelligence does not play any particular role, nor does the will, so far as my experience goes, either with energetic or irresolute persons. — *Dr. O. G. Wetterstrand.*

Subjects are Secretive.—A hypnotic subject will often say that which he would not say in his waking moments. Nevertheless, he never betrays a vital secret. The reason is obvious. The instinct of self-preservation, always alert to avert any danger which threatens the individual, steps in to his defense. Instinctive auto-suggestion here plays its subtle role, and no sug-

gestion from another can prevail against it. — *Dr. T. J. Hudson.*

Easy Subjects.—A person who is easily hypnotized can be hypnotized by anyone; but one who is hypnotized with difficulty can only be thrown into hypnosis by a good and experienced operator. — *Dr. Albert Moll.*

Obstacles in Hypnotizing.—Disturbing noises at the first experiment have power to prevent hypnosis; they draw off the attention and thus interfere with the mental state necessary for hypnosis. Later, when the subject has learned to concentrate his thoughts, noises are less disturbing. But in hypnotic experiments the most absolute avoidance by those present of any sign of mistrust is necessary. The least word, a gesture, may thwart the attempt to hypnotize. As the mood of a large company is often distrustful, the great variations in susceptibility to hypnosis which have shown themselves at different times and places are explicable. It is not surprising that on one occasion ten persons, one after the other, are hypnotized, while on another occasion, ten other persons all prove refractory. — *Dr. Albert Moll.*

Waking Up.—If the awakening is not brought about by artificial means, persons in a light hypnotic state habitually wake of their own accord after a few minutes, or even seconds. This specially happens when the continuance of the sleep has not been expressly ordered. Some people wake at the exact moment when the operator leaves them, as they then no longer think themselves under his influence. Others

wake of their own accord out of deep hypnosis if they hear an unexpected or loud noise, or have exciting dreams. It is nearly always possible to put an end to the hypnosis by mental means — that is, by the command to wake up, or to wake up at a particular signal. It is hardly ever necessary to use other means, such as fanning, sprinkling, etc. — *Dr. Albert Moll.*

Choice of Methods.—Which of the various methods or which combination of them is the best for practical use, is not a very simple question. Different methods bring about nearly identical results. I am decidedly of opinion that in each individual case that method should be selected by means of which the most vivid picture of the hypnosis and the conviction that it will come on can be produced in the subject.—*Dr. Albert Moll.*

Hypnotism at Childbirth.—I have hypnotized six women at childbirth. In one, instrumental interference became necessary by means of forceps. She claimed to be wholly unconscious of what was done. One patient died, as was afterwards proved, from organic disease of the heart, during labor, while in the hypnotic state. The death, however, was not due in any way to hypnotism.—*Dr. J. R. Cocke.*

To Judge Simulation.—It has been too much the habit to look for one physical symptom or another and settle the question of fraud from its presence or absence. And yet this is exactly the opposite from what is generally done in judging of mental states; *e. g.*, when we want to diagnose a case and decide whether it is insanity or not, no

authority on mental disorders would suppose fraud simply because some bodily symptom was absent. He will consider and weigh the case as a whole. Even when each symptom taken separately might be fraudulent, they would be weighed against one another and a diagnosis formed from them. If the doctor finds, also, some symptom which cannot be simulated, he will weigh this, too, but he will not conclude fraud from its absence.—*Dr. A. Moll.*

Caution to the Healer.—Never give to the hypnotized subject, without his consent, any suggestions other than those necessary for his cure. The physician has no rights but those conferred upon him by the patient. He should limit himself to the therapeutic suggestion; any other experiment, even if it should be in the interest of the science, is forbidden him, without the formal consent of the patient. The physician should not, if he thinks that the experiment which he wishes to perform may have the slightest harmful effect, profit by his authority over the patient in order to provoke this consent.—*Dr. H. Bernheim.*

Managing a Suggestible.—A neurotic patient complains of pain in her legs. She cannot walk. Suggestion soothes the pain during sleep; but upon waking she feels too weak to walk; there is some pain still. I put her into somnambulism again and say: "You are cured; you are at home. Get up, attend to your housekeeping; work, since you have been cured." She gets up, walks very well, takes up a towel and a duster, and also a broom which is brought to her, begins to dust and does not complain of anything.

Upon waking she walks very well. Thus, by a powerful diversion, or by transforming passive into active somnambulism, the efficiency of suggestion may be increased. — *Dr. H. Bernheim.*

Simulation and Hypnosis.—Minor degrees of hypnosis are sometimes very difficult to distinguish from simulation of the hypnotic state. However, it is impossible for anyone simulating hypnotism to obey the different suggestions with that hearty co-operation with which the genuinely hypnotized person will. Hysterical persons simulating the hypnotic state will at times act very remarkably indeed; their facial contortions are painful; they will make hideous noises, and, for the sake of confounding the operator, will refuse to desist at his command. — *Dr. J. R. Cocke.*

Surroundings in Hypnotizing.—The room in which experiments are to be performed must be neither too warm nor too cold. Dryness is always encouraging to hypnosis, while damp air disturbs the influence. Strong odors of flowers and certain perfumes are very often advantageous. Strong lights are by all means unfavorable. A mild and shaded light is always favorable. The subject's seat must be as comfortable as possible; the least noise, the buzzing of a fly, the creaking of shoes, may disturb the good results in causing an involuntary distraction of thought, which tends to disturb the effects of the manipulations of the operator. — *Carl Sextus.*

Hypnotic Rapport.—When the mother goes to sleep with the child by her side, she, though slumbering, does

not cease to watch over her babe. While asleep she is still watching. Although she remains unconscious of every noise, no matter from what other source, she will awake at the slightest movement or outcry of her babe. The hypnotic rapport bears great resemblance to this. It is the same concentrated consciousness that causes the mother, solely interested in her babe, to observe every little noise, every sound or movement from it—which makes the hypnotized somnambule so sensitive to every impulse emanating from the hypnotist, while the subject, as has been proven, remains entirely indifferent to any other person. — *Carl Sextus.*

Uncertainties of Hypnotism.—Sometimes the subject resists. We have noticed that even in hypnotic sleep, his will is not always destroyed; *he refuses to accept the suggestion*, or if he accepts it for a moment, the influence does not remain with him. Melancholic, hypochondriac, and certain neuropathic cases, often rebel against hypnotic sleep; they do not allow themselves to be influenced. What is told them makes no impression; or if the hypnotic suggestion succeeds with some, the therapeutic suggestion remains inefficacious. — *Dr. Bernheim.*

Test for Somnambulism.—Do not expect that everyone will become a somnambulist; neither imagine that because you do not find a high degree of suggestibility when absurd suggestions are given, that the cause of the failure lies in you or your method—it is in the individual. If he obeys the suggestion that his eyes are fastened tight, proceed to suggest that your hand is burn-

ing his, and if he pulls it away, commence giving suggestions with his eyes open, looking him directly in the eyes; after several rapid and forceful repetitions of a suggestion he will generally begin to act on it, provided you have his attention. This condition is known as active somnambulism.—*Dr. Herbert A. Parkyn.*

Another Good Test.—Have the subject close his eyes and lock his fingers together behind his neck. Stand in front of him with your hand on top of his head and your thumb at the root of his nose. Suggest that his eyes will be heavy, etc., and at the end of about a minute and a half, test for fixation of the lids. If he opens his eyes easily, make him close them for about a minute longer, and try again. If you obtain fixation, suggest that his fingers are glued together, and he cannot take his hands down. If he has obeyed the suggestion of fixation of the lids, he will usually obey the other.—*Dr. Herbert A. Parkyn.*

Test of a Subject.—Close the subject's eyes, and picking up his left hand, make a firm and steady pressure with your thumbs on the back of his hand. Tell him that the sensation will soon become a pain; that it will extend up his arm gradually, and that he must inform you as soon as it has extended above the wrist. A good subject generally will say inside of a minute or two that the pain is above the wrist. If he does say so he is likely to prove a somnambule. If he does not act upon the suggestion inside of three or four minutes, place one of your hands on his head in the usual manner, wait a moment or two, and then suggest fixation of the eyelids.—*Dr. Herbert A. Parkyn.*

Conflicting Results.—Docility to suggestion and the ease with which various phenomena are performed are not always in proportion to the depth of the hypnotic sleep. Certain patients sleep lightly, answer questions and remember them upon waking, notwithstanding contractions, insensibility, and automatic movements may be present, and curative suggestions will succeed well with them. Others, on the contrary, fall into a deep, heavy sleep and remember absolutely nothing on awaking. While they are asleep, they can be questioned in vain; tormented with questions, yet they remain inert. Suggestive catalepsy is very difficult to induce in these cases. The arms are held up only for a short time, and the mere pronouncing of the word "awake" is sufficient to arouse them up spontaneously. Each sleeper has, so to speak, his own individuality, his own special personality.—*Dr. H. Bernheim.*

Manner in Suggestion.—It is an easy matter for anyone to make suggestions that are verbally unexceptionable—that are theoretically perfect, that read well in print, and that seemingly ought in all cases to be effective. And yet very many of these theoretically perfect suggestions utterly fail to accomplish their object. The obvious reason is that the manner of making a suggestion, the tone of voice, the expression of the countenance, the general air of confidence, or lack of it, and a thousand other things too subtle to be formulated in words, have more to do with success than the mere language employed. This is especially true of suggestions made to patients who are not in a previously induced state of hypnosis.—*Dr. Thomson J. Hudson.*

Who are Hypnotizable?—It is wrong to believe that the subjects influenced are all weak-nerved, weak-brained, hysterical or women. Most of my observations relate to men. No doubt susceptibility varies. Common people, those of gentle disposition, old soldiers, artisans, people accustomed to passive obedience seem to me more ready to receive the suggestion than preoccupied people or those who often unconsciously oppose a certain mental resistance. Cases of insanity, melancholia and hypochondria are often difficult or impossible to influence. The idea of being hypnotized must be present; the patient must submit entirely to the hypnotizer, using no mental resistance. Then, I repeat, experience shows that a very large majority of people are easily influenced. — *Dr. H. Bernheim.*

Cause of Self-Hypnosis.—In auto-hypnosis, the idea of hypnosis is not aroused by another person, but the subject generates the image himself. This can only happen by an act of the will. Just as the will is otherwise able to produce particular thoughts, so it can allow the idea of hypnosis to become so powerful that finally hypnosis is induced; this is, however, rare. Self-hypnosis generally takes place in consequence of some incident by means of which the idea of the hypnosis is produced. This often happens when the subject has been often hypnotized. — *Dr. Albert Moll.*

Supposed Failures.—On waking again, some patients who have not been beyond the degree of drowsiness, imagine that they have not been asleep because they remember everything they

have heard. They believe they have been influenced from a wish to be obliging, but if the experiment is repeated, suggestive catelepsy again appears. If this is not sleep, it is at least a peculiar condition which renders the mind receptive to suggestion. — *Dr. H. Bernheim.*

Sleep Not Necessary.—I use the word sleep in order to obtain as far as possible over the patients a suggestive influence which should bring about sleep, or a state closely approaching it; for sleep properly so-called does not always occur. If the patients have no inclination to sleep and show no drowsiness, I take care to say that sleep is not essential, that the hypnotic influence — whence comes the benefit — may exist without sleep, that many patients are hypnotized although they do not sleep. — *Dr. H. Bernheim.*

How Some Hypnotists Fail.—After a number of failures to hypnotize, I came round somewhat to the same opinion of the masses, that professional hypnotists gave a general outline of their methods, but that the actual secret of their success they jealously guarded. My opinion, briefly stated, is that the operator must have absolute confidence in his ability, or faith that he can hypnotize his subject. This confidence must be impressed, mentally, upon the subject by a determined will — an intense will. Without this double force of will and faith, linked with suggestion, no one can become a successful operator. I have frequently taken a new subject, and have let my mind drift on other matters, that is, I did not use my mental

energies, but in a mechanical way suggested hypnosis. The result was failure. I then turned to the subject, making full mental determination that he must go to sleep, and he would sleep. — *Dr. C. O. Sahler.*

Managing a Subject. — When I wish to illustrate the higher order of hypnotism for scientific purposes, I put my subject into a deep sleep, and make the suggestion that he does not know his own name, and that it will be impossible for him to tell his name. I suggest another to him and he answers only to his new name. If he responds to this suggestion, I consider him a first-class subject to use for that class of work which seems marvelous to the onlooker. When I have him in this stage of hypnosis, I suggest to him that whatever he does he will have no remembrance of when awakened; that it will all be as a blank to him. Now I have control of all his senses. I can suggest to him that he is unable to see — that he is blind; and then if he makes an attempt to walk, he will run against or over anything which may be in his way. I may suggest that he is deaf, not only to conversation, but to the loudest noise, and it then makes no difference who may talk to him, how loud they may shout; a horn may be sounded close to his ear, or even a gun be shot off, he will not by a change of expression of his face give any indications that he is taking note of such noise, however loud and violent it may be. — *Dr. C. O. Sahler.*

Exercise in Concentration. — It is impossible to estimate the extent to which the practice of right concentration may be beneficently carried, but

it is by no means difficult to outline a few of the preliminary steps which all must take (and which all can take), if real progress is to be made. Our five senses are rightfully ours to control. The human eye, with its perfectly constructed lids, is a perfect illustration of how the soul is able to look out through its windows or remain retired behind the curtains; which, when drawn, exclude effectually all visions of the external world. No better topic for meditation can be suggested to beginners in the art of concentration than: "I have eyelids as well as eyes; I can open and close my eyes at pleasure." Simple though that sentence is, when anyone seriously considers its wide-reaching import, it will not be long before many a much-needed and thoroughly logical inference will be presented to the understanding, leading the thinker entirely beyond the doctrine taught in the necessarily restricted letter of the words employed. If I can control my sight and make it serve me as I please, why not my hearing, taste, touch and smell also? If I can regulate perception through the avenues of one sense, why not through all the other senses, also? — *Prof. W. J. Colville.*

Hypnotizing of Animals. — Experiments tried upon a very intelligent dog have entirely failed to produce any effect. Although the old test with the hen and the piece of chalk has been cited as evidence of hypnosis induced in the hen, it can only be considered an example of the induction of a state analogous to that of hypnosis in its inhibition of muscular action. It is possible to induce a condition resembling catalepsy, or muscular rigidity in the frog; and in Hudson's "Law of Psychic

Phenomena" you will find a most interesting theory regarding the powers of horse-trainers, keepers of wild animals, etc. I do not believe that it is possible to induce catelepsy in a horse, and cannot see the importance of experimenting on the lower animals for evidence of a state which is analagous in only one particular to that of hypnosis. If you place a frog upon its back and hold it so it will remain in that position for some time without motion, after your hands have been removed. If you repeat this experiment with the same frog constantly, the length of time for which it remains motionless will be much increased, until it comes to pass that the frog expires upon its back. I presume that if you threw a horse and kept him thrown for five minutes, then allowed him to get up, and threw him again instantly, keeping him upon his side for ten minutes; and repeated this performance, gradually extending the time until the animal understood that it was useless to struggle, you might so force the idea upon the horse that he could not move, that he would require much urging and an application of the whip before he would make an attempt to rise. Obviously the horse is not in a condition of hypnosis, and I think it would be as well to understand that the word hypnotized cannot be applied to any animal but the highest—man.—*Dr. Sydney Flower.*

Treatment of the Refractory.—

Some patients are more rebellious, pre-occupied, unable to give themselves up; they analyze their own feelings, are anxious and say they cannot sleep. I command them to be calm. I speak only of drowsiness, of sleepiness. "That is sufficient," I say, "to gain a result."

The suggestion alone may be beneficial, without sleep. "Keep perfectly quiet and do not worry." When a patient is in this frame of mind I do not try to get cateleptiform effects, because being only drowsy yet always awake, always apt to regain full consciousness, he is easily aroused out of this state. Sometimes when satisfied with a doubtful state of somnambulism, and without wishing to prove that the patient really is influenced, I leave him to himself, requiring him to remain in this condition for some time. Some remain under this influence for a long period without being able to say whether they have done so voluntarily or involuntarily. Generally during the second or third seance I succeed, by means of this suggestive education which the patient has had, in inducing a more advanced state of hypnotic influence, which is no longer doubtful but accompanied with suggestive catelepsy or even with somnambulism.—*Dr. H. Bernheim.*

Suggestion in Healing.—The mode of suggestion should be varied and adapted to the special suggestibility of the subject. A simple word does not always suffice in impressing the idea upon the mind. It is sometimes necessary to reason, to prove, to convince; in some cases, to affirm decidedly; in others, to insinuate gently; for in the condition of sleep, just as in the waking condition, the moral individuality of each subject persists according to his character, his inclinations, his special impressionability, etc. Hypnosis does not run all subjects into a uniform mould, and make pure and simple automatons out of them, moved solely by the will of the hypnotist. It increases the cerebral docility; it makes the

automatic activity preponderate over the will. But the latter persists to a certain degree; the subject thinks, reasons, discusses, accepts more readily than in the waking condition, but does not always accept, especially in the light degrees of sleep. In these cases, we must know the patient's character, his particular psychical condition, in order to make an impression upon him. — *Dr. H. Bernheim.*

Suggestions Must Fit. — As no two cases are exactly alike, it follows that the suggestions given must necessarily fit the case, and be given with a view to bring about the mental and physical conditions desired. For instance, in treating a patient who is afflicted with insomnia, suggestions of sleep should be persistently given; and in cases of malnutrition, suggestions of hunger should be made, to stimulate the appetite for food. The operator must bear in mind that the reiteration of the suggestion that will change the condition existing to that desired, is always the right one, and his own intelligence will be the best guarantee as to what that suggestion should be. — *Dr. Herbert A. Parkyn.*

Force of Auto-Suggestion. — We have all heard or used the expression, "Says I to myself." Well, this is exactly what we do when we employ voluntary auto-suggestion. The force of a voluntary suggestion is apparent when we arise in the morning at an hour which we impressed on our voluntary mind before going to sleep. This same force may be employed for many other purposes, and when a patient understands what it is, he will use it continually to assist himself. To give a very

practical illustration of the force of voluntary auto-suggestion, I frequently ask a new patient to stand erect with his eyes closed and to concentrate the attention for a few moments on the sensation of falling backwards. It is impossible for anyone to do this without immediately beginning to sway backwards. I then point out that the same force which contracted the muscles of the legs and back unconsciously, will also assist in bringing about any bodily condition we desire, provided suggestion is taken often enough. — *Dr. Herbert A. Parkyn.*

Training in Self-Suggestion. — Voluntary auto-suggestion is a most valuable aid to a person of good power of concentration. I am accustomed to teach my patients to treat themselves for minor ailments in this way, or to assist me in more serious conditions, and find that it is a worthy assistant. A friend of mine who is training in the gymnasium, uses auto-suggestion to help him to do new or difficult feats. If he is tired, or has tried several times and failed, he lies down, relaxes, drops into a semi-subjective state, and gives himself the suggestion that the little rest will enable him to gather his energies so that he can do the test easily, which it generally does, sometimes much to the astonishment of the onlookers and himself. — *Dr. Jay A. Potter.*

Suggestion in Surgery. — I consider it the duty of every physician, surgeon and dentist to urge its use in every major or minor operation. Of course, not every surgeon or dentist is acquainted with its use, nor will every patient permit its use, if he knows what

is to be attempted. Indeed, only to-day, a successful young dentist told me he had lost several patients through advocating the use of suggestion. However, if a surgeon or a dentist who is about to perform an operation on a patient has a knowledge of suggestion, and his patient is willing to have the anæsthesia for the operation induced by suggestion, it would be nothing short of criminal for him to administer any other anæsthetic until suggestion had proved unavailing. Especially would I advocate its use in the aged and those suffering from heart, lung, or kidney troubles, and patients possessed of certain idiosyncrasies. — *Dr. Herbert A. Parkyn.*

Treatment in Natural Sleep.—

Unless the sleeper becomes attentive, suggestive treatment in natural sleep is ineffective and useless. The operator must be assured by word of mouth that the sleeper is no longer busied with his fancies and dream-pictures. He must be assured that suggestions are not only heard, but are obeyed, realized, become fact in the sleeper's mind. There is an easy way by which the operator may satisfy himself that what he says will not only be heard, but heeded by the sleeper, viz: After receiving a response from the sleeper, the operator should take hold of the hand lying nearest to him and raise the arm of the sleeper, saying: "Your arm will stay in the position in which I place it. It will not feel fatigued. It will stay where it is put." Hold the arm in the air for a few seconds, repeating these suggestions, and then let go. If it stays as put, the sleeper's attention is fixed upon the operator. If it falls, there is a condition of weariness present which prevents the suggestion from taking

firm hold of the mind, and other suggestions given will be equally ineffective. Therefore it is well to repeat this experiment, and the suggestions given, until the fixation of the arm in the air attests the fixation of the attention of the sleeper. Now he both hears and heeds. — *Dr. Sydney Flower.*

Hypnotic and Natural Sleep.—

Induced sleep and natural sleep are the same, yet not the same. There is one important point of distinction between these two states. It is the law of natural sleep that the sleeper is in relationship with himself alone. It is the law of induced sleep that the sleeper is in relationship with the operator. During natural sleep the patient is inattentive; during induced sleep he is attentive. It does not weaken this position to admit that there are exceptions in both cases; that sometimes the person who has passed into a state of natural sleep enters spontaneously into relationship with others, as in those cases where sleepers may be drawn into conversation by captious speech; or, that it occasionally happens that the person who has been put to sleep by the operator, passes from a condition of attention to one of inattention. — *Dr. Sydney Flower.*

Suggestion in Natural Sleep.—

To gain the attention of one who has relapsed into a natural sleep, the operator should quietly take up a position beside the couch of the sleeper, and in a low whisper say something like the following: "Now, William," (or whatever the name may be), "you are not going to wake up, but you hear every word I say." Repeat these words to this effect over and over again, gradually raising

the voice until you realize your voice would be sufficiently loud to awaken the subject under ordinary circumstances, but in this instance he still sleeps. You have no doubt got his attention. To test which fact, raise his hand and tell him he will hold it up. If he obeys you, then you are certain that even though asleep, he hears your voice and will act upon your suggestions.—*Dr. G. H. Bradt.*

Stages of Hypnosis.—Induced somnambulism is the condition in which many of our patients earnestly desire to be put, in order that they may see visions and dream dreams. It is not a very common condition, however, and is not an inevitable result of hypnosis. On the contrary, a good degree of hypnosis may be obtained, and sleep induced, without there being any evidence of somnambulism, either active or passive. Somnambulism means simply that condition in which hallucinations and illusions will be accepted and realized by the patient at the insistence of the operator. But we may draw a sharp line of distinction between the condition of hypnosis into which all persons of intelligence may be put, and the condition of somnambulism. Hypnosis is present when the patient is unable to open his eyes or raise his arm when the operator suggests that such acts are impossible. This shows a degree of receptivity to suggestion sufficient to govern voluntary muscular action, and the hypnosis is then deep enough for therapeutic purposes. But the presence of somnambulism implies a greatly lessened power of resistance to suggestion, and is only seen in its perfection when the patient under treatment is not mentally of a strong, vigorous nature. In other

words, and this is very important to remember, hypnosis and sleep may be induced in the strongest and most intelligent with as much ease as in the weakest; but the phenomena of perfect somnambulism can, as a rule, be witnessed only in those who are mentally, as one might say, “not quite up to the mark.”—*Suggestive Therapeutics.*

The Operator's Demeanor.—It cannot be too strongly impressed upon the minds of those who are making practical use of this science, that humor, or any approach to levity, is a serious blunder and may dissipate a good condition of subjectivity. It is better to be stolid and impassive when treating a patient, than to permit even the ghost of a smile to play about the mouth or brighten the eyes. Earnestness is impressive, and your business is to impress. Cultivate severity of demeanor and dignity of deportment. Remember that the man who laughs with you is not so apt to ask your advice as the man who thinks you reserved, even disagreeable, but safe.—*Dr. Sydney Flower.*

How Bernheim Hypnotizes.—Sometimes he makes the usual passes; sometimes, if the patient has been in the ward awhile, they are not necessary. For instance, new patients are brought in. If they are special patients, he never applies hypnotism without their consent or the consent of their friends. He talks to them kindly and gently, asking a history of themselves and their ailments. If they are nervous, he sometimes strokes their hands gently. As they talk they become quiet and less timid. At last he says: “Now you are going to have a good sleep. When you

wake you will feel much better; you will have a good appetite and you will feel stronger. *Dormez-vous profondement.*" The patient goes to sleep, is rested and placed in a position so that nature, or nature and medicine, have an opportunity to do their best.—*Hypnotic Magazine.*

Hypnotism without Sleep.—

Among Dr. Parkyn's cases treated at the clinic of the Chicago School of Psychology is that of a lady who was cured of insomnia by suggestion, but in whom not even fixation of the eyelids, the first symptom of inhibition of muscular action, was obtained. Again it must be repeated and insisted upon that hypnotism is not a condition of sleep, but that sleep may accompany hypnotization.—*Dr. Sydney Flower.*

Waking Up Patients.—Never handle a patient roughly. Inexperienced persons have produced convulsions in patients by getting excited and flurried themselves, and using violent means to awaken their subjects. Some patients will awaken themselves at the exact expiration of a period of time suggested by the operator. It does no harm to leave a person asleep. Bernheim allowed a patient to sleep eighteen hours. Generally, however, the patient will awaken naturally in a few minutes, as from an ordinary sleep. Before awakening the patient, he should always be prepared by a few suggestions like these: "When you awaken, you will have no unnatural feelings about your body, no headache, but you will feel so rested and strong, etc." In order to awaken a patient, it is always enough, and should be the only means used, to say, "I am going to

wake you up now, you will wake up, slow and easy, slow and easy, you will wake up when I count ten; one, wake up, two, wake up, etc." When we have reached five, some of the principal therapeutic suggestions may be repeated, also to have the patient awaken cheerful, etc., and continue, "six, wake up, slow and easy, etc." Patients invariably wake up when the number set is reached; if they do not, simply repeat in an easy manner, that they are waking up slowly, etc.—*Dr. Robert Sheerin.*

Persistence in Operating.—There are operators who maintain that everybody is hypnotizable if only the attempt is continued long enough. Without declaring this view to be false, I may remark that I have made forty or more attempts with some persons without obtaining hypnosis. Perhaps by even longer continued efforts, a result would have been attained, as indeed has happened to me many times, after forty vain attempts.—*Dr. Albert Moll.*

Faith not Essential.—It matters not whether the patient believes in suggestion as a method of cure or not; that is, he need not have the implicit confidence in it that those who have been cured of lingering and painful diseases by it, enthusiastically manifest; all the faith required at first is enough to bring him to us and insure a faithful observance of our instructions. It is of no consequence whether he goes to sleep or not when we commence to treat him, for he will listen to the suggestions we give him, and they will impress him; from day to day he will gain in faith till he will finally give himself up to any sensible suggestions to go to sleep, and

then he is just like any other patient that goes to sleep from the start. His objective mind is in abeyance and his subjective mind takes charge of his bodily functions.—*Dr. Geo. C. Pitzer.*

Future of Auto-Suggestion.—The duty of the present generation is to teach children something of this power of auto-suggestion. Teach them to check their pains instead of exaggerating them; teach them to rely upon themselves and their own power, instead of leaning for help and weakening sympathy upon their parents. Teach them to be strong. The power is in them; it is a question of training whether it shall be developed or allowed to lie idle and unused.—*Medical Hypnotism.*

Catholic View of It.—The power of hypnotism resides in the soul of the subject. How great this power is and to what extent it can be used, nobody can yet say, because nobody knows the power of a being that is God-like (created after God's image and likeness). This power is set into activity by suggestion. There is an old principle of psychology which says: *Nihil in animo, nisi prius in sensibus.* We cannot reach the soul except through the senses, which is done by suggestion, by seeing, hearing, touching, etc. We reach the soul either by one or more senses, the latter being the stronger suggestion. The soul being "forma corporis," it must have an immense power over its own body; it forms, so to say, its own body. The power was nearly unlimited before the fall of man, and will be so again in the glorified body. It can be aroused in its torpid, you might call it, sinful state, and this

is done by hypnotism, or, if you want, by suggestions.—*Rev. Father Schlatter.*

A Priest-Suggestionist.—About three weeks ago a man came to me and told me that a fellow-laborer of his had bewitched him, was persecuting him day and night. He saw all kinds of ugly pictures whenever he closed his eyes, and heard that man knocking at his bedstead every night. When he told me that his wife saw and heard nothing, I concluded that he had hallucinations, brought on by auto-suggestion. I explained to him how I could take that trouble away by contrary suggestions, and his submission to them. But the poor fellow had not a bright intellect. All I could get out of him, after my explanation, was: "Yes, father, I believe a priest can cure me." I then laid my fingers on his eyes, and said: "Now you can see no more ugly pictures, you hear no more knocking, you are not afraid of that man, you can look him straight in the eye." I asked him to close his eyes then and try what he could see. He tried it and said he saw nothing any more. I had laid my fingers on his eyes in order to make the suggestions stronger. That way I reached his soul through the senses of hearing and touch.—*Rev. Fr. Schlatter.*

Value of Auto-Suggestion.—About a year ago I attended a series of exhibitions by one of the most prominent stage hypnotists; a man who thoroughly understands the subject; and the one thing which impressed me was the pains he took to cultivate proper auto-suggestion in his class of volunteers, by showing how his "trained subjects" acted,

or placing them at the ends of the row before beginning each new line of "tests." This was for the same reason that the physician carefully explains what he is about to do and what results he expects when he begins treating a new patient. It is planting ideas which will act as auto-suggestions. Our whole aim in treatment is virtually to so fix correct ideas in the patient's mind that they become permanent auto-suggestions. When ideas become so fixed in the mind that auto-suggestion is carried out involuntarily, or unconsciously, there is a condition of automatism established which we call habit. A habit tends to perpetuate itself, and this is the reason for the permanency of results in suggestive work. It frequently happens that cases in which we have not as good results as we could wish, are reported later as never having had any trouble since quitting treatment. The proper ideas having been fixed in their minds, auto-suggestion has carried on the work and established the condition.—*Dr. Jay A. Potter.*

How to Suggest.—In treating one's self or others by suggestive therapeutics, the oral suggestion is nearly always most effective. It is best to combine the different forms of suggestion in giving treatment. Let your physical suggestions (those that reach the mind through either of the five physical senses) be accompanied by the silent thought suggestion, at the same time making as much use as possible of the patient's auto-suggestion.—*Dr. Robert Sheerin.*

Form of Suggestion.—In the treatment of any case we should never make a doubtful speech. Negative sugges-

tions are permissible, but affirmations are better. For example, we may say, "The pain is leaving your face, the pain is now all gone from your face, etc." But we might say, "Your face will soon feel easy and comfortable, your face is already feeling more comfortable, your face is feeling perfectly well, easy and quiet—perfectly well." Our suggestions should be as free from ideas of painful or diseased conditions as possible. Think about the conditions you really want, then form your suggestions of such words as will clearly express your wants. In the above case, what did we want? You infer from the suggestions made that the patient was suffering from pain in some part of the face. Well, if this be the case, we want an easy, comfortable condition, do we not? Then what should we say? Is it necessary for us to refer to the pain, in order that the patient shall have comfort? No. Never mind the pain; it is only a negative condition, and we ignore it, and go on and demand what we want—an easy, comfortable condition, and we get it. Now these are hints that may serve us in any case, no matter what it may be.—*Dr. Geo. C. Pitzer.*

Harmful Suggestions.—A false suggestion invariably produces a nervous shock of greater or less intensity in proportion to the character of the suggestion, and the consequent amount of resistance it encounters. This occurs for precisely the same reason that a criminal suggestion will produce that result. A criminal suggestion provokes an antagonistic auto-suggestion of an intensity proportioned to the subject's character for moral rectitude. A false suggestion, in like manner, provokes

an adverse auto-suggestion of varying intensity, proportioned to the subject's education, experience and inherent love of truth. In either case, a nervous shock, of greater or less intensity, is produced. — *Dr. Thomson J. Hudson.*

How Suggestion Works.—This is the way suggestion operates: A receptive state of mind is induced in the patient—the suggestion is given that he will soon be well—he believes that he is about to be cured, and his mind determines the result, and he is cured. It is plain that it is faith or belief that is the connecting link that completes the circuit of curative powers. There is a law which appears to be almost without exception, namely, that what a person expects is likely to appear in him, whether it be physiologic or psychologic. will really come about. — *Dr. A. C. Halphide.*

How Suggestion Cures.—The force which heals a man is within himself, and when understood, may be controlled by himself; and, just as the activity of the propelling force within a man who walks a mile is stimulated or depressed by the nature of his thoughts, so, also, will suggestion, when properly directed, arouse the healing force within man, and on the nature of the suggestions given will depend the extent to which it is aroused. Many a patient has lived for days after the "physician's allotted time" expired, sustained only by some stimulation of his vital force. For example, an intense desire to see some loved one, hastening to bid farewell. It is often the remnant of vital force which, when intelligently directed by suggestion, suffices to arouse into activity some organ which for a long time

has been hopelessly dormant, but which, when aroused, enables the patient's internal organism once more to resume its normal action, and draw him back from the very jaws of death. — *Dr. H. A. Parkyn.*

Power of Auto-Suggestion.—Auto-suggestion is the great psychological miracle, and few realize the part it plays in the drama of life. It accounts for much self-deception and self-elation; it regulates the number of births among intellectual people; it renders immune from diseases, and perpetuates diseased states; it has changed non-contagious into contagious maladies; it is lord of the realm of habit; it lays bare the secret of influence—the influence of what is seen and heard, of things unsaid, of things undone; it explains the accomplishment of seemingly impossible feats; it is the channel through which genius finds expression; and it may be contended, with no small show of reason, that the subliminal self of a Stratford butcher's apprentice, under the spell of an objective suggestion inspired in his boyhood by the pageants of Coventry, created the deathless plays of Shakespeare. — *Prof. John D. Quackenbos.*

Suggestion in Dentistry.—It is well known that some dentists have acquired a great local reputation for pulling teeth without pain, by employing local anæsthetics. But it is not so well known that some of them have learned that a little scented water is all-sufficient for the purpose of inhibiting pain. One dentist in a neighboring city learned this lesson by mere accident. He had the reputation of pulling teeth without pain, and everybody knew that

he used a local anæsthetic. But one day a gentleman rushed into his office and informed him that he wanted a tooth drawn in time to take a train which was due to start almost immediately. He had, in fact, just one minute to spare, and he wanted a painless operation. The doctor seated him in his chair and reached for his anæsthetic. But it was all gone. Not a drop was left. He was about to inform the patient of the fact, but reflected he would be likely to lose the job if he was obliged to go for a fresh supply, or if the patient knew he could not have the benefit of the anæsthetic. So he resolved to rub a little water on the gum and pull the tooth at all hazards, reflecting (the mind of the true physician acts with preternatural rapidity in cases of emergency), that when the patient discovered the fraud it would be too late. The tooth would be out and the fee would be due, and it might possibly be paid. On the other hand, the patient might kick or even blaspheme, but he would have no time to conduct an assault, for his train was due. So the tooth was duly pulled; but there was no violence offered in word or deed. On the contrary, the patient seemed pleased. He paid his fee with alacrity, remarking: "Great stuff, isn't it? Didn't feel the slightest pain. Hardly felt the forceps." The dentist had taken his first lesson in suggestion as an anæsthetic in dental surgery.—*Dr. Thomson J. Hudson.*

Preparing for Treatment.—If convenient, place the patient in a reclining chair; at any rate, get him to relax as much as possible. Dispose yourself in a convenient position beside or in front

of him. If you have talked sleep, tell him to close his eyes and think of getting drowsy. Keep the suggestions going, speaking in a quiet, confidential and low-pitched tone of voice, stroking the forehead and temples, making light passes down the arms and pressing the eyelids lightly from time to time to emphasize the various suggestions. The suggestions should lead from thinking of feeling drowsy gradually to going sound asleep, by successive steps, each being repeated several times. If you have talked magnetism, take the patient's hand in your own, throw the muscles of the hand and forearm into contraction, which will communicate a vibratory sensation to the patient. Explain to him that this will spread gradually over his entire body, that it is a delicious sensation, makes him feel quiet, restful, and drowsy; that after he becomes filled with it, he will remain so until you draw it off by reverse passes, and so on. The change in your patient's expression, or the muscular twitchings, will tell you when a sufficient passivity is obtained. A deep sleep is necessary in but few cases, and it is quite as readily induced by this as by any other method.—*Dr. Jay A. Potter.*

How Skeptics are Caught.—A patient enters the sanctum of a mental healer, and begins by saying, "I understand that it is necessary that your patients have faith before they can be healed. If that is the case, I never can be healed by mental treatment, for I am utterly skeptical on the subject." To which the ready reply is, "Faith is unnecessary under my system. I do not care what you believe, for I can

heal you, however skeptical you may be." This is generally satisfactory to the skeptic. He brightens with hope and submits to the treatment, full of the faith that he is to be healed without faith. It is superfluous to add that by this stroke of policy, the healer has inspired the patient with all the faith required, namely, the faith of his subjective mind.—*Dr. T. J. Hudson.*

Waking Suggestion.—The American schools of suggestive therapeutics have demonstrated in their clinical practice that a great majority of patients can be effectively treated by suggestion in a waking condition; or at least by the induction of so slight a degree of hypnosis that amnesic conditions do not ensue.—*Dr. Thomson J. Hudson.*

Hypnotic Healing.—This method of healing rests upon the law that persons in the hypnotic condition are constantly controllable by the power of suggestion, and that by this means pain is suppressed, function modified, fever calmed, secretion and excretion encouraged, etc., and thus nature, the healer, is permitted to do the work of restoration.—*Dr. T. J. Hudson.*

Cure of Neuralgia.—I have had a number of neuralgias and similar nervous diseases under my treatment, and the result has, in general, been satisfactory. The remedy has, of course, now and then disappointed me, but it was generally due to the patient's non-susceptibility to hypnotism. The method has seldom been a failure when the patient slept soundly. Neuralgias are just that kind of diseases over which

hypnotic suggestion gains its triumphs, as, beyond all comparison, it acts more surely, and especially more pleasantly than the usual methods of cure—massage and electricity.—*Dr. O. G. Wetterstrand.*

Priests as Students.—I wish to call the attention of my reverend brethren to this great science, which can be of such great help to us in relieving suffering mankind. We do not often have to hypnotize in order to get the wished-for results. The great confidence people place in us is sufficient to enable us to direct their submissive minds by kind, strong and salutary suggestions to work the wonders of hypnotism in their afflicted bodies. The priest must know all about hypnotism. It should be taught in seminaries. He can no more evade an embarrassing question about hypnotism by shrugging his shoulders. He should know. He can get instructed if he wants to.—*Rev. Fr. Schlathoelter.*

To Insure Sleep.—Some patients fall rapidly into a more or less deep sleep. Others offer more resistance. I sometimes succeed by keeping the eyes closed for some time, commanding silence, and quiet continuous talking and repeating these formulas: "You feel a sort of drowsiness, a torpor. Your arms and legs are motionless. Your eyelids are warm. Your nervous system is quiet. You have no will. Your eyes remain closed. Sleep is coming, coming, etc." After keeping up this verbal suggestion for several moments, I remove my fingers. The eyes remain closed. I raise the patient's arms; they remain uplifted. We have now induced cataleptic sleep.—*Dr. H. Bernheim.*

Treatment in Acute Cases.—In addition to the subject's looking at a bright object, suggestions should be made rapidly, and sometimes very sternly. Where there is extreme restlessness and insomnia with those who are acutely ill, with fevers, for example, utter repose should be sought, and the senses of touch and hearing are the best avenues through which to induce it. Natural sleep sometimes comes, instead of artificial hypnosis. In this natural sleep the patient will not obey suggestion, but it is almost always preferable to any artificially suggested condition of sleep.—*Dr. J. R. Cocke.*

Instantaneous Cures.—Muscular pains, the painful points in phthisis, certain dynamic contractures, even though bound up with the organic affections of the nervous centers, certain movements which remain after chorea, incontinence of urine, which children suffer from at night, etc.,—often disappear as if by enchantment after a single suggestion, or after several.—*Dr. J. R. Cocke.*

Magnetism in Acute Troubles.—In certain inflammatory diseases, which are situated in the most essential viscera, magnetism, employed at the time of the attack, can perform wonders in re-establishing the general harmony and bringing about a crisis. Many experiments prove that it has promptly cured pleurisy which commenced by a sharp pain in the side and the spitting of blood. In this case, we begin by placing the palm of the hand upon the seat of the pain and let it remain there some time; then we spread the pain by making passes at a distance with the open hand.—*J. P. F. Deleuze.*

Hypnosis in Surgery.—I have hypnotized forty-two persons for minor and major surgical operations. Six obstetrical cases are to be added to the list, making a total of forty-eight. Every one of these patients was hypnotized more than once before a surgical operation was attempted. Six of them were major or capital operations, exclusive of the obstetrical cases. This leaves thirty-six of my cases which were only minor operations. Four of these thirty-six, while there was no danger in the operation performed upon them, would have suffered severely had it not been for the deep hypnotic trance.—*Dr. J. R. Cocke.*

Cure of Morphinism.—Twenty-two persons addicted to the morphine habit have been hypnotized by me. Out of this number seventeen have been cured. Hypnotism alone was used in four cases of these seventeen. The others were treated by hypnotism supplemented by medicines which would tone the nervous system. All of my twenty-two cases contracted the habit as a result of physicians prescribing the drug. All of them could be hypnotized. The worst cases were cured the most easily. Much of the suffering incident to the sudden abandonment of the morphine habit can be relieved by hypnotism. The use of morphine, or any of the preparations of opium, seems to make the subject more sensitive to hypnotism.—*Dr. J. R. Cocke.*

Study Your Patients.—I must plead earnestly for a careful study of each individual patient. The physician, if possible, should feel as the patient feels; should not only place himself, in imagination, in the position of his patient,

but should share as far as possible with, and realize every condition of, the patient's consciousness. How often this is ignored does not need to be stated. Could we understand and measure accurately all of these feelings, desires and emotions of our patients, much needless suffering would be assuaged. Possibly many broken hearts healed, and, certainly many wrecked lives restored to usefulness.—*Dr. J. R. Cocke.*

Cure in Light Hypnosis.—It is not always necessary to have deep sleep for the manifestation of a rapid action; simple dullness is sufficient in some cases; certain subjects are suggestible in the waking condition. For example, one of my patients, whose history I shall give in detail, had a contracture in flexion of the hand, the result of an old hemiplegia. For a year he was not able to hold it open. He was a great snuff-taker, but could not use his hand for this purpose. I hypnotize him and suggest that his hand is pliant again, that he can now open and shut it. He tries during his sleep, and succeeds easily in stretching and bending his fingers. "If it could only last," he says. I assure him that it will last. And so it does. When he wakes, the stiffness has disappeared. He remembers everything he did during his sleep; he does not think he has been asleep.—*Dr. H. Bernheim.*

What Cures Depend on.—It is in somnambulism that suggestion reaches its maximum efficiency, and that cures are often instantaneous and seem miraculous. Certain subjects resist for many seances; they only fall into somnolence; the effect obtained is slight or doubtful.

By persevering for a longer or shorter time, several days or even several weeks, with hypnotizations which give but little result, some subjects can be put into a deeper sleep, and then the therapeutic action of suggestion may be rapid and lasting.—*Dr. H. Bernheim.*

A Healer's Test.—Take hold of your subject's hands—grasp them firmly—look him squarely in the eyes, and tell him that he will soon feel a magnetic current pass in at his left hand and out at his right. Keep suggesting this and ask him from time to time if he feels it. If he does, you will know that your subject is probably a somnambule, although some who are not somnambules will fancy that they actually feel this. If the subject declares that he does feel the vibration, tell him to close his eyes, and grasping his hands firmly, state positively that his eyes are fastened. If they are fastened, you may make up your mind that you have a good subject. This is a favorite method among magnetic healers.—*Dr. Herbert A. Parkyn.*

How Patients Stay Cured.—When a cure is really made by suggestion and is credited to some other agency, the faith aroused is a false one. Far different is it with a patient cured by "directed suggestion." He understands exactly how and why he has been cured. He learns to observe a number of nature's important laws, the effect of the mind upon the body, the control of his thoughts, etc., and it is a rare thing to find an intelligent patient seeking relief a second time for a trouble of which he has once been cured by suggestion.—*Dr. Herbert A. Parkyn.*

Treatment of Stammerers.—In treating stammerers or stutterers, make them conscious of their breathing until they have formed the correct habit of abdominal breathing. Make them speak in a very exact way until the habit of exact and correct speech is formed. They should be taught, also, to control facial contortions, if any be present, and practice before a mirror will be found very serviceable in correcting such defects.—*Dr. Herbert A. Parkyn.*

Cure of Hallucinations.—My patient was a little girl of neurotic family history. She stated that playmates invisible to others haunted her night and day. Some of them were kindly, others teased her for her playthings, called her horrid names, while others spoke in a language she did not understand. The little one was pale, exceedingly irritable, and would hold conversations for hours at a time with the imaginary spectres. Remedies were given her for bodily condition, and although it improved, the morbid fancies grew stronger. She was hypnotized at the first sitting, all hallucinations vanished at the third sitting, and she remained well for eight months, and then contracted pneumonia and died.—*Dr. J. R. Cocke.*

Cure of Nail-Biting.—Anna L., age 35, married. Robust figure, sanguine temperament; entered clinic Dec. 6, 1897. She had perfect confidence in the method of cure, and readily passed into the light stage of somnambulism. I suggested that she would not bite the nails again, that she would not even have the desire to do so, but would feel pain if she did it. She awoke feeling well. Was entirely free from all nerv-

ousness, and left with the idea firmly impressed upon her that she would recover. During December and the early part of January, she was treated five or six times, with only a slight recurrence once or twice. January 24th, came to clinic. Her finger nails had grown out to full natural length, showing that the habit was completely broken—patient had not the slightest desire to return to the old habit; discharged, cured.—*Dr. E. Perry Rice.*

Cure of Insomnia.—I sincerely believe there is no better remedy for insomnia than hypnosis. Experienced physicians share this opinion. By hypnotic suggestion, the sleepless person learns so to control his sleep, that it becomes possible for him to sleep whenever he wants to.—*Dr. O. G. Wetterstrand.*

Telepathic Healing.—The best possible condition for the conveyance of therapeutic suggestions from the healer to the patient is attained when both are in a state of natural sleep; and such suggestions can be so communicated by an effort of will on the part of the healer, just before going to sleep.—*Dr. T. J. Hudson.*

Method of Telepathic Healing.—The method is as simple as it is effective. All that is required on the part of the operator is that he shall be possessed of an earnest desire to cure the patient; that he shall concentrate his mind just before going to sleep, upon the work on hand, and direct his subjective mind to occupy itself during the night in conveying therapeutic suggestions to the patient. To that end, the operator must accustom himself to the

assumption that his subjective mind is a distinct entity; that it must be treated as such, and guided and directed in the work to be done. The work is possibly more effective if the operator knows the character of the disease with which the patient is afflicted, as he would then be able to give his directions more specifically. But much may be left to instinct, of which the subjective mind is the source.—*Dr. T. J. Hudson.*

Scope of Magnetic Healing.—Cures of almost all diseases, effected by magnetism, have been cited; but it would be wrong to conclude from them that magnetism is a specific for all. There are many individuals on whom it acts very slightly, and perhaps not at all, as there are others who are extremely sensible to it. Therefore, it cannot be said that magnetism cures this or that disease; but only that it has cured these or those individuals who were attacked by it, which is a very different thing. Besides, those who have written upon magnetism have generally related cases wherein they have produced remarkable effects, without speaking of those in which its action has been powerless.—*J. P. F. Deleuze.*

Reward of Telepathic Healing.—For obvious reasons, it is not a method by which money can be made. But it is pre-eminently a means of laying up treasures where neither moth or rust can corrupt, nor thieves break through and steal. Each one has it in his power to alleviate the sufferings of his neighbor, his friend, or the stranger within his gates; but his compensation must consist in the consciousness of doing good, and in the hope of that reward promised by the Master to those who do

their alms in secret. There is, nevertheless, a practical and immediate reward accompanying every effort to heal the sick by the method herein indicated. It consists in this,—that every earnest effort to convey therapeutic impressions to a patient during sleep is inevitably followed by a dreamless sleep on the part of the healer. Moreover, therapeutic suggestions imparted during sleep, inevitably react favorably upon the healer, and thus his own health is promoted by the act which conduces to the health of the patient.—*Dr. T. J. Hudson.*

Treatment of Skeptics.—In thousands of instances, profound skeptics have been successfully treated by suggestion without hypnotism. In such cases success is due to a volitional abandonment on the part of the patient, of all adverse thoughts or ideas. This is usually accomplished under the instructions of an intelligent physician, who emphasises the necessity of perfect relaxation of mind and body. Sometimes this is urged upon the patient by designating the condition as one of "passivity" and "receptivity." The same object is sometimes accomplished by keeping the objective mind of the patient occupied by rhythmical breathing. These, and cognate methods innumerable, are well known to the intelligent practitioner, and are only mentioned by way of illustration. The salient point is that the prime object in each case is to obtain a "suspension of judgment." The physician well knows that if that can be accomplished, even temporarily, he can reach the subjective mind and effect a cure; or, at least, such a marked improvement of conditions as to disarm future adverse auto-suggestions. The

result of this success is seen in the next treatment, which, other things being equal, is always more effective than the first; and so on in a constantly increasing ratio.—*Dr. Thomson J. Hudson.*

The Healing of Mind.—The immortal bard, Shakespeare, wrote, "Who can minister to a mind diseased?" I reply that today capable psychologists can and are doing so by various methods. A great number of the diseased nervous conditions we meet are brought about by overwrought mentality and auto-suggestion. Everything in the visible, material world has its origin in the unseen,—the spiritual, thought world. What one lives in his invisible thought world, he is continually actualizing in his natural world, and harmonizing influences can be communicated to others by vital, mental, telepathic or mental suggestion, and neither time nor space can retard their effectiveness.—*Dr. J. T. Taylor.*

Case of Alcoholism.—When he came to me, he was considerably under the influence of liquor; indeed, he had not been free from its influence for many months, but he was in as good a condition as he was likely to be found, so I began his treatment in that state. He was hypnotized and went into a profound hypnosis. While in this condition, positive suggestions were made to him to the effect that he had a strong mind, and could rid himself of any habit, if he chose to; that he wanted to quit drinking and had made up his mind to do so; that the appetite for drink would leave him and never return again; that drink, with all its associations, would be disgusting to him; that he would regain his self-control and

self-respect, and become a respectable man once more; that he would be proud of his victory, for it was his own strong mind that was winning it for him, and that his cure would be permanent. Similar suggestions were repeated to him daily for four days, and two or three times a week for the balance of the month. The results were all that could be desired. He did not taste liquor after the first treatment and soon lost his appetite for it. Today liquor has no temptation for him.—*Dr. A. C. Halphide.*

Method of Treatment.—Having obtained the requisite subjectivity, continue the suggestions, directing them now to the relief or the removal of the conditions present. If the trouble is complicated, only suggest the removal of some minor symptoms and amelioration of the rest, at the first seance. If the trouble is of long standing, suggest the inhibition for a short time only, at first, and lengthen the intervals as circumstances seem to indicate. It is better to have the symptoms relieved completely for the short time suggested than to have them in abeyance for a longer time, but return before the suggested limit. Always suggest rest from the seance, better sleep, appetite, etc., and more prompt and deeper subjectivity at succeeding seances. Assure him he has done nicely, and you are sure he will be greatly benefited by the treatment; then tell him to awaken quietly. Do not question him of his sensations or memory, or allow him to talk of them, at least not for some time after arousing. Ascribing the effects of suggestion to magnetism is akin to attaching extraordinary potency to placebos. Indeed, it is often advisable to use placebos

and suggestions without any formal attempt to induce subjectivity. But this is open to the objection that it teaches the patient to depend upon an outside agency, instead of the powers within his own soul. And this important cultivation of self-reliance and self-control is one of the most important features of suggestive therapeutics.—
Dr. Jay A. Potter.

Suggestion in Asthma.—I have a case of asthma. My patient is breathing with great difficulty. He seems to be able take in all the breath required, but while the effort of inspiration is comparatively easy, expiration labors him very much and he really suffers great distress on account of this difficult breathing. There is a spasmodic condition of the bronchial tubes, the air cells are filled to repletion, the patient perspires freely, and he complains of pain and distress in his breast. What do we want? What does the patient want! The patient would like to have free and easy breathing. Then we will suggest to him that he will soon become quiet, that he will breathe free and easy, that he will soon sleep, and that when he wakes up he will find himself breathing free and easy, all day, every day, and that he will be perfectly well. These suggestions should be made over and over again to him, for there is a mighty force in repetition and frequency; and if we forcibly impress the suggestions above made, no matter how severe the distress, how violent and spasmodic the cough, the patient will relax, and will finally go into a quiet, sound sleep. So far as my experience goes, there is no treatment in use equal to suggestion in all cases of asthma, either acute or chronic; and we depend upon

it as a radical cure as well as a measure for temporary or immediate relief.—
Dr. Geo. C. Pitzer.

Suppression of Pain.—A large proportion of persons can never be made analgesic or anesthetic by hypnotic suggestion, because the auto-suggestion, or the fear of pain, in the patient is too strong to yield to the suggestion of the operator. But it is a fact that in some persons the sense of pain can be entirely inhibited during hypnosis so that an inflammation that was acutely sensitive to the touch before hypnotic sleep, can be handled without eliciting a murmur or movement from the patient during and subsequent to hypnosis. What does this mean? It means that the power to inhibit pain is *inherent* in the individual man—is a part of his cerebral mechanism, and the sooner he understands he has this power, the better for the welfare of the race.—*Medical Hypnotism.*

Qualities of the Healer.—The qualities necessary for a magnetic healer are assurance, earnestness and a professed love for humanity. These have, first, an impressive effect; secondly, an elevating influence. You must touch your patient's heart as well as his imagination. If he does not respect you, your time is wasted; the mystery loses half its force. To talk to your patient in an off-hand manner is fatal to effect. He must look up to you with something akin to awe. Explain nothing to him. Tell him nothing. If he asks for a clue to this mysterious force, tell him that many explanations have been proffered, none of which is satisfactory. A final word as to earnestness. The magnetic

healer is first earnest, because it is necessary to success; later, success itself confirms him in earnestness. A well-filled pocketbook makes for gravity of demeanor, and is a foe to levity.—*Dr. Sydney Flower.*

Value of Assumption.—Assumption is necessary to all improvement in the mental, moral, or physical man. Assumption is necessary to all achievement. Assumption is the mechanism by which the will achieves. It is the spring of determination. When a patient assumes that he is well, he is determined to be well, and is half cured. There may be power wanting to make of that assumption a fact; but, if the power is there, the assumption must always precede the realization of the cure. The power of assumption, in presenting an idea clearly to the mind, seems to me to be almost equal to the power of blind faith, since the effect of assumption is almost identical with the effect of faith, and since faith cannot live separate and apart from assumption.—*Dr. Sydney Flower.*

Passes in Treatment.—We make passes over the patient that he may realize that something is being done for him; and let me remark that no matter how nervous and disturbed any patient may be, what disease he may be suffering from, if you will place him in a recumbent posture, have him close his eyes and make long passes over him from head to foot, he will soon feel the quieting influence coming from the effort, especially if you suggest that he is becoming quiet and restful. You may ask what good comes from the passes. Well, you may think as you please about that, but that good results follow, I do know.

I am quite sure, however, that suggestion—*thought force*—does it all. No physical change results from the passes, but they enable us to project thoughts more directly and forcibly, and prepare the patient to receive them more readily, and with greater effect. A novice in suggestive therapeutics can nearly always do better work if he is permitted to make passes and manipulate his patient while he is giving his suggestions, and it is frequently so with healers of experience; but as we grow in experience, and learn that it is *thought force* that makes the changes sought, we do not depend so much upon passes and manipulations for results. Magnetic healers depend upon touches, but it is *thought* that heals.—*Dr. Geo. C. Pitzer.*

Uncertainty of Medicine.—The volume of testimony produced by one part of the medical world to rebut the testimony of opposing schools would certainly appal the wisest judge on earth, and cause him to commit attorneys and witnesses on both sides of the case until sober. The allopath can report numerous cases that the homœopath failed on. The homœopath retaliates by relating cures that the allopath failed to relieve. The eclectic rubs his palms together and gleefully relates how he has cured patients that the allopath and homœopath both failed on.—*Dr. H. M. Ochiltree.*

Is Diagnosis Necessary?—In suggestion used purely as a therapeutic agent there is no danger. Our medical friends tell us that, having devoted much time to the study of the structure of the human body and to the functions

which appertain to each of its organs, they can diagnose better than the layman. They overlook the fact that in many cases diagnosis has very little to do with the cure of disease. If the patient is suffering from one trouble, and he believes he suffers from another, and we direct suggestions to the disease which is in his mind, the subjective mind will immediately apply itself to the removal of the trouble, whether the suggestions be in accord with the actual disease or not. If a patient tells me that he suffers from constipation, I suggest to him that his bowels will move regularly; if from insomnia, I say that he will sleep well, and I know that it will produce the desired result. — *Alexander Fraser*.

The Healing Process.—The vital force which heals a patient is within the patient himself. The vital force is generated within the patient himself, by the digestion and assimilation of food. The amount of vital force generated depends on the quantity and quality of food introduced into the stomach. Anything which will interfere with the necessary supply of properly selected food, or the digestion and assimilation of food after it has been received by the stomach, will interfere with the generation of the vital healing power. The digestion may be retarded or completely stopped by certain mental states. The food supply should be regulated by a correct knowledge of the requirements of the body. Knowledge is stored in the mind, and that mind is created and influenced entirely by suggestion. The creation, expenditure and control of vital healing force are directly or indirectly dependent upon suggestion. If one would intelligently direct this heal-

ing force, he must have a thorough knowledge of the effects of suggestion. He must understand the simple means for ascertaining the individuality and suggestibility of his patient, so that he may determine in advance the mental and physical effect any given suggestion is likely to produce. — *Dr. H. A. Parnyn*.

Control of the Absent.—It is quite possible for an operator who is thoroughly *en rapport* with his subject, to mentally reach and influence him to do things which he may not have any moral objection to doing. In short, telepathy is an established fact. It is also no less an authenticated fact that no person, under any circumstances, can be influenced to do anything contrary to his settled principles and convictions. Hypnotic subjects, like the rest of the people of this world, are free moral agents. — *Dr. R. Sheerin*.

Curable Habits.—The following are some of the more important habits that suggestive treatment, combined (when necessary) with the proper remedies, can positively and permanently cure, and to the efficacy of which treatment many persons owe their present freedom from that most severe taskmaster—habit. Liquor habit, desire removed in from twenty-four to forty-eight hours, cure in two to four weeks; morphine, cocaine, and all drug habits, extreme cases cured without suffering for the want of the drug. Tobacco habit, all the hankering removed, and in many cases extreme dislike takes its place; habit of eating chalk, slate, starch, etc.; habits of speech, including stammering, nervous loss of voice, etc.; habits of sleep, sleep walking and

sleeplessness, nocturnal enuresis and all undesirable acts during sleep; habits in children, lying, stealing, biting finger nails and all vicious tendencies; habits of thought producing great worry, abnormal fears, mental delusions and various irregularities of the mind.—*Dr. G. H. Brady.*

Opening of Treatment.—Children are more subjective than adults, hence childhood is the formative period of the individual, when environment—suggestion—has the greatest influence. Women are more subjective than men, consequently more emotional than calculating, swayed more by sentiment than by interest, perceiving by intuition rather than by reason. The poet who breathes the atmosphere of his own higher sensibilities, the actor who lives the character he portrays, the minister who is inspired by the word he proclaims, are examples of the subjective condition produced by intense interest or attention to some cherished idea. The subjective self is not only the real self, it is the unconscious manner through which one person affects or influences another.—*Dr. Jay A. Potter.*

Opening of Treatment.—The doctor wants quietude, rest, relaxation, concentration and suggestibility. These are always secured by a quiet, confidential talk about the patient's trouble, what it is, how it came, and what is to be done for it. This puts him at his ease, secures his interest, and gives him confidence in the doctor and his methods. The character of this talk must be varied to fit the understanding of the patient. It should be made thoroughly clear to him just what you propose to do, how you do it and what effects he

is to experience, and what results he may expect. I do not mean that you should go into a scientific dissertation on the subject, but give him what will be comprehensible in the simplest language and manner possible, being sure to let him see that you believe he fully understands you. With uneducated people it is often best to call your treatment magnetism, which they think they understand. You may explain to the doubting that you don't care a rap whether they have any faith in your treatment or not; what you want is willingness, obedience and co-operation, and you will see to the results. If the patient is an uneducated woman or girl, she may get scared and become unmanageable if you talk sleep to her. In such cases, it is best to simply explain passivity and a feeling of lassitude, leaving the sleep idea until they have acquired confidence in themselves and you.—*Dr. Jay A. Potter.*

A Master at Work.—A child is brought to me with a pain like muscular rheumatism in its arm, dating back four or five days. The arm is painful to pressure; the child cannot lift it to its head. I say to him, "Shut your eyes, my child, and go to sleep." I hold his eyelids closed, and go on talking to him. "You are asleep and you will keep on sleeping until I tell you to wake up. You are sleeping very well, as if you were in your bed. You are perfectly well and comfortable; your arm and legs and your whole body are asleep, and you cannot move." I take my fingers off his eyelids, and they remain closed; I put his arms up, and they remain so. Then, touching the painful arm, I say, "The pain has gone away. You have no more pain any-

where; you can move your arm without any pain; and when you wake up, you will not feel any more pain. It will not come back any more." I wake the child in a few moments; he remembers nothing; the sleep has been profound. The pain has almost completely disappeared; the child lifts his arm easily to his head. I see the father on the day following, and he tells me the pain has disappeared completely, and there has been no return of it. — *Dr. H. Bernheim.*

Instruct your Patients.—Wherever it is possible to do so, reason should be appealed to as the preliminary step in the treatment of patients. That is, the patient should be instructed in the fundamental principles which underlie the science of suggestive therapeutics. By this means the suggestions of the physician are reinforced from the start by the concurrent auto-suggestions of the patient; and as the latter emanate from the reasoning mind, and are the result of scientific induction, they are of necessity the strongest that can be imagined. It goes without saying that in this way, the strongest possible array of suggestive forces are marshaled, with not a discordant element in the combination. Its effectiveness will be limited only by the intelligence of the patient. — *Dr. T. J. Hudson.*

Value of Passivity.—In all systems of healing, the processes, or rather the conditions, are essentially the same; the first essential condition, as before stated, being the perfect passivity and receptivity of the patient. That is always insisted upon, and it is the essential prerequisite, be the theory and method of operation what they may. The rest is

accomplished by suggestion. Thus, the whole science of mental healing may be expressed in two words,—passivity and suggestion. By passivity the patient becomes receptive of subjective impressions. He becomes partially hypnotic, and sometimes wholly so. The more perfectly he is hypnotized, the surer the favorable result. But, in any case, perfect passivity is sure to bring about a good result. — *Dr. T. J. Hudson.*

Helping Children.—The next case recited was one of night terrors in a little girl of five years of age. Under light hypnosis, she was assured that the "big black man" would appear to her no more, and that she would sleep soundly all the night through. This one suggestion was sufficient to relieve her. Another case is given of a girl of fifteen who experienced a great difficulty in reciting. She could learn, but when called upon to face the school and answer to questions, she was entirely unable to respond, and was obliged to take her seat in disgrace. Hypnosis and suggestions of her ability to perform these tasks, and suggestions against her timidity, enabled her to pass very creditable examinations. — *Report of Dr. Osgood Mason.*

Hypnotic Entertainments.—The success of the entertainment will largely depend on the versatility of the operator. He should study his audience, and aim to give experiments that will entertain. People who go to see a hypnotic entertainment, do not, as a rule, care much about the scientific side of the subject; they go to be entertained; and he who best understands the art of entertaining, succeeds best as a stage hypnotist. — *Dr. Herbert A. Parkyn.*

